

AMENDED CH. 13 PLAN - DEBTS SHEET
(MIDDLE DISTRICT - DESARDI VERSION)

Date: **12/22/09**

Lastname-SS#: **Tardif-6638**

RETAIN COLLATERAL & PAY DIRECT OUTSIDE PLAN

Retain	Creditor Name	Sch D #	Description of Collateral
	Wells Fargo Home Mtg		
	Scotland Co. Tax		

SURRENDER COLLATERAL

Creditor Name	Description of Collateral

ARREARAGE CLAIMS

Retain	Creditor Name	Sch D #	Arrearage Amount	(See †)
	Wells Fargo Home Mtg			**
	Scotland Co. Tax			**
				**
				**
				**
				**
				**
				**

REJECTED EXECUTORY CONTRACTS/LEASES

Creditor Name	Description of Collateral

LTD - DOT ON PRINCIPAL RESIDENCE & OTHER LONG TERM DEBTS

Retain	Creditor Name	Sch D #	Monthly Contract Amount	Int. Rate	Adequate Protection	Minimum Equal Payment	Description of Collateral
				N/A	n/a		
				N/A	n/a		
				N/A	n/a		
				N/A	n/a		

STD - SECURED DEBTS *a* FMV

Retain	Creditor Name	Sch D #	FMV	Int. Rate	Adequate Protection	Minimum Equal Payment	Description of Collateral
	Wells Fargo Auto Finan.		\$12,850	6.00	\$129	\$345.10	2006 Chevrolet Equinox
				6.00			
				6.00			
				6.00			

STD - SECURED DEBTS *a* 100%

Retain	Creditor Name	Sch D #	Payoff Amount	Int. Rate	Adequate Protection	Minimum Equal Payment	Description of Collateral
				6.00			
				6.00			
				6.00			
				6.00			
				6.00			

ATTORNEY FEE (Unpaid part)		Amount
Law Offices of John T. Orcutt, P.C.		\$2,600
SECURED TAXES		Secured Amt
IRS Tax Liens		
Real Property Taxes on Retained Realty		\$134
UNSECURED PRIORITY DEBTS		Amount
IRS Taxes		
State Taxes		
Personal Property Taxes		
Alimony or Child Support Arrearage		
CO-SIGN PROTECT (Pay 100%)		Int.% Payoff Amt
All Co-Sign Protect Debts (See*)		
GENERAL NON-PRIORITY UNSECURED		Amount**
DMI= None(\$0)		None(\$0)

PROPOSED CHAPTER 13 PLAN PAYMENT

\$ **\$388** per month for **48** months, then

\$ **N/A** per month for **N/A** months.

Adequate Protection Payment Period: **17.11** months.

Sch D # = The number of the secured debt as listed on Schedule D.

Adequate Protection = Monthly 'Adequate Protection' payment amt.

† = May include up to 2 post-petition payments.

* Co-sign protect on all debts so designated on the filed schedules.

** = Greater of DMI x ACP or EAE

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Ch13Plan_MD_(New_DeSardi) (6/24/09) © John T. Orcutt

Other Miscellaneous Provisions

Plan to allow for 3 "waivers".

DECLARATION OF DEBTOR

The Debtor above-named declare under penalty of perjury that they have read the foregoing amended or supplemental documents and any attachments thereto and that they are true and correct to the best of their knowledge, information and belief.

Dated: December 22, 2009

/s Deborah Ann Tardif

Deborah Ann Tardif

CERTIFICATE OF SERVICE

I, Gabrielle Morrison, of Law Offices of John T. Orcutt, P.C., certify under penalty of perjury that I am, and at all times hereinafter mentioned was, more than eighteen (18) years of age and that on December 22, 2009, I served a copy of the amended Chapter 13 Plan, by automatic electronic noticing upon the following parties:

Richard Hutson
Chapter 13 Trustee
P.O. Box 3613
Durham, N.C. 27702-3613

and by regular U.S. mail upon:

Deborah Ann Tardif
Post Office Box 203
Laurinburg, NC 28353-0203

/s Gabrielle Morrison
Gabrielle Morrison

amendmd.wpt (rev. 2/5/07)